

JUN 16 2006

BINGHAM McCUTCHEN

Facsimile

DATE: June 16, 2006

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East Palo Alto, CA
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TO:	Examiner Suhan Ni United States Patent and Trademark Office	571-273-7505 571-273-8300	571-272-7505

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PAGES: (INCLUDING THIS COVER PAGE): 15

Boston
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RE: U.S. Patent Application Serial No. 10/008,268
 Entitled: Dynamic Range Compression Using Digital Frequency Warping
 Date Filed: November 13, 2001
 Inventor: James M. Kates
 Our Docket No.: GNR-7002452001

MESSAGE:

Certificate of Transmission (37 C.F.R. § 1.8(a)):

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Dated: June 16, 2006

Name of Person Certifying: *Sheila Badon*

Printed Name:

Sheila Badon

Enclosed:

- Transmittal (1 pg.);
- Fee Transmittal (1 pg.);
- Request for Continued Examination (RCE) (1 pg.);
- Amendment and Response to Office Action (11 pgs.);

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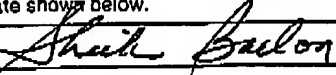
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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/008,268	RECEIVED CENTRAL FAX CENTER JUN 16 2006
	Filing Date	November 13, 2001	
	First Named Inventor	James M. Kates	
	Art Unit	2646	
	Examiner Name	Suhan Ni	
Total Number of Pages In This Submission	14	Attorney Docket Number	GNR-7002452001

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply (11 pgs). <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Formal Drawing(s) (sheets) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition to Correct Inventorship <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Continued Examination (RCE) Fax Cover Sheet to Examiner
Remarks 		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Bingham McCutchen LLP		
Signature			
Printed Name	Gerald Chan		
Date	June 16, 2006	Reg. No.	51,541

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Sheila Badon	Date	June 16, 2006

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PA/52184520.1/2022645-7002452001

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL
for FY 2006**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** 790.00

Complete if Known

Application Number	10/008,268	RECEIVED
Filing Date	November 13, 2001	CENTRAL FAX CENTER
First Named Inventor	James M. Kates	JUN 16 2006
Examiner Name	Suhan Ni	
Art Unit	2646	
Attorney Docket No.	GNR-7002452001	

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) : _____

☒ Deposit Account Deposit Account Number: 502518 Deposit Account Name: Bingham McCutchen LLP

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	—
Design	200	100	100	50	130	65	—
Plant	200	100	300	150	160	80	—
Reissue	300	150	500	250	600	300	—
Provisional	200	100	0	0	0	0	—

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)
Each independent claim over 3 (including Reissues)
Multiple dependent claims

Small Entity	
Fee (\$)	Fee (\$)
50	25
200	100
360	180
Multiple Dependent Claims	
Fee (\$)	Fee Paid (\$)

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

— -20 or HP= — x — = —

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

— - 3 or HP= — x — = —

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
—	—	—	—	—

— - 100 = — / 50 = — (round up to a whole number) x — = —

4. OTHER FEE(S)


Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Request for Continued Examination (RCE)

Fees Paid (\$)

790.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	51,541	Telephone	650-849-4960
Name (Print/Type)	Gerald Chan	Date	June 16, 2006		

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